

PIEDMONT POLICE DEPARTMENT P.O. Box 488 Piedmont, OK 73078



Citizen's Crime Report

Who is the victim?						
Business Information						
Name	Address	1	Phone			
Your Personal Informati	ion					
Last Name	First Name	First Name Middle Name				
Height Weight	Hair Eyes	Race	Sex			
Date of Birth	Social S	ecurity #				
License #	Class	State				
Address	City	State	Zip			
Home Phone	Work Phone	Em	nail			
Location Where Crime Occurred						
Address	City	State_	Zip			
This Crime Occurred Between IF YOU DON'T KNOW EXACTLY WHEN THE CRIME HAPPENED: (FOR EXAMPLE: You go to sleep at 11:00 PM on Friday Night. You wake up Saturday morning at 8:00 AM an find our you are the victim of a crime. The crime happened <u>BETWEEN</u> 11:00 PM <u>AND</u> Saturday at 8:00 AM.)						
Date D	Day of Week	Time	AM/PM			
AND						
Date D	ay of Week	Time	AM/PM			
My vehicle was involved	in the crime					
YearVehicle	e Make	Color	 			
Tag Number	Vehicle Identification Num	ber				

List property that was lost, stolen or damaged. Value Disposition Description /Serial Number 1. 2. 3. 4. 5. 6. 7. 8. 9. 10. **List Witnesses** Witness #1 Name____ Address Phone Witness#2 Name Address Phone Witness #3 Name Address_ Phone_

Suspects

1.

	Height	_Weight	Hair	_Eyes	Age	Clothing	
					_		
2.	Name		_ Address			_Race	Sex
	Height	Weight	Hair	Eves	Age	Clothing	

Race Sex_

Address

Suspect's Vehicle

Name__

Year	Veh Make	_ Color	
Tag Number	Vehicle Identification Number		

Narrative EXAMPLE: I woke up at 8:00 AM and found my car had been broken into. They broke my left front window with a rock to get in. They stole my stereo and tapes. My neighbor saw two men in my car at 7:00 AM.

I AM THE VICTIM OR A REPRESENTATIVE OF THE VICTIM OF THE CRIME. THE INFORMATION IN THIS REPORT IS TRUE. *I WILL ASSIST* IN THE PROSECUTION OF THOSE PERSONS RESPONSIBLE FOR THE CRIME.

___ Date

WARNING: IT IS A VIOLATION OF BOTH CITY AND STATE CRIMINAL CODES TO WILLFULLY MAKE A FALSE POLICE REPORT.

Signature